CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

DATE OF REPORT 2.a. NAME OF CA	ANDIDATE OR COMMITTEE
	ett Fairchild Campaign
2.b. IF COMMITTEE, NAME OF CANDIDATE	3. ELECTION DATE
Everett Fairchild	8/3/06
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route City	State Zip Code Phone
4704 Whispering Hills LN HIX5ON	TN 37343 423-877-2750
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) Street or Rural Route City	State Zip Code Phone
Same	2.5 0000
5. OFFICE SOUGHT (include district number, if applicable)	6. NAME OF POLITICAL TREASURER (may be candidate)
School Board District 3	Bob Freeman
7. CATEGORY OR REPORT (Check one) FIRST SECOND THIRD FOURTH QUARTER QUARTER QUARTER QUARTER 8.a. BEGINNING DATE OF REPORTING PERIOD 1/25/06	PRE- PRE- MID-YEAR YEAR-END . PRIMARY GENERAL SUPPLEMENTAL SUPPLEMENTAL 8.b. ENDING DATE OF REPORTING PERIOD 9 50/06
9. (Check one)	
tures total \$1,000 or less for this reporting period. (Com	closure because contributions (including in-kind) received total more than \$1,000
	res required to be reported by the candidate committee by the Campaign at no campaign contributions have been expended for the personal financial as defined by the federal internal revenue code. Signature of political treasurer date
11. WITNESS SIGNATURE	
11. WITNESS SIGNATURE	
Karlotte Mellis 10/10/08	6
signature of witness date	signature of witness date
12. SUMMARY	2
	211.96
a. BALANCE ON HAND LAST REPORT	S
b. TOTAL RECEIPTS THIS PERIOD	\$ 896.14
	1108.10
c. TOTAL DISBURSEMENTS THIS PERIOD	
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)	S_0,00
e. TOTAL LOANS OUTSTANDING	S:S M9 01 130 6005 s 0.00
f. TOTAL OBLIGATIONS OUTSTANDING	NOISSIUMOS ETECTION



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) Everett Fairchild Campaign	14. REPORT COVERING THE PERIOD FROM: 7/25/06 TO: 9/30/06						
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	1102100						
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 50.00						
b. Itemized Contributions (over \$100 from each source this period)							
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	ATTORNA AN ANNA						
16. LOANS RECEIVED THIS REPORTING PERIOD							
17. INTEREST RECEIVED THIS REPORTING PERIOD							
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 876,17						
DISBURSEMENTS							
19. EXPENDITURES (other than loan payments)							
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	.g., printing, postage, gasoline)						
Kick-DSF Publications \$ 35							
(Screen Dire)							
\$							
\$							
\$							
\$							
\$							
\$							
Total of Expenditures (\$100 or less each payee)	\$ 35						
b. Itemized Expenditures (Over \$100 each payee this period)	\$ 505.00						
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$ 540 -						
20. LOAN REPAYMENTS MADE THIS PERIOD	\$ 568. 10						
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)							
22.IN-KIND CONTRIBUTIONS	2						
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$						
b. Itemized in-kind contributions (over \$100 from each source this period)\$							
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)\$							
23. OBLIGATIONS							
a. Unitemized Obligations Outstanding (\$100 or less each)	\$						
b. Itemized Obligations Outstanding (Over \$100 each)	\$						
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$							



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE EVENELT Fairch	. , _)			2. REPORT COVER		
Everett tairch	1/0			FROM 7/25/06	TO: 9/39/06	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT	IONS FRO	M PRECEDING PAG	GE (enter \$0 if first itemized p	age)	0.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR E	1000 C 1000 C	Section 1997 and 199	contributions totaling more than S	\$100 from any contributor)	
First Name Everetz	Middle Name	2	Contribution Received For.		Amount of Contribution	
Fair Child			Primary Election			
Address 4704 Whispering	H.119	LN	Runoff (Local Election	ns Only)	\$846.14	
Occupation Refined	State	Zip Code 37343	Date of Contribution	Date of Contribution		
Occupation Refined			9/8/06			
Employer			4/8/06	7/8/06		
Smillion	INCAR-NO		Contribution Provinced So	#846,14		
First Name	Middle Nam	ne 	Contribution Received Fo	r. General Election	Amount of Contribution	
Last Name/Organization Name			Primary Election			
Address			Runoff (Local Election			
Слу	State	Zip Code	Date of Contribution	Date of Contribution		
Occupation						
Employer			1			
First Name	Middle Nam	1e	Contribution Received Fo	nr.	Amount of Contribution	
Last Name/Organization Name			Primary Election		Allocate of Contribution	
Last Name Organization Name				General Election		
Address			Runoff (Local Electi	ions Only)		
City	State Zip Code		Date of Contribution	Date of Contribution		
Occupation						
Employer						
First Name	Middle Nai	me	Contribution Received For		Amount of Contribution	
Last Name/Organization Name			☐ Primary Election			
Address		Runoff (Local Elect	tions Only)			
City	State	Zip Code	Date of Contribution	Aggregate This Election		
Occupation		_				
Employer	-		_			
TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3, of next page if additional page (If this is the last page of contributions, this amount makes).					\$846.14	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE EVERETT Fair child	Ca	mpzign		2. REPORT COVER FROM: 7/25/66	TO: 9/30/06
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	Amount 0.00				
4. COMPLETE THE APPROPRIATE ITEMS FOR E.	ACH ITEMI	ZED EXPENDITURE (ex	xpenditures totaling more than \$100	to any payee during the peri	od)
First Name	Middle Nan	ne	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name Chattanooga Times Fooddress	Puess	Advertizing	,	#325 -	
Cit.					#325
City	State	Zip Code			
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name Chatta nooga Times Fro	ee Pa	155	Advertizing		\$ 180.00
			Haver		10010
City	Zip Code				
First Name	Middle Nar	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			ý.
First Name Middle Name			Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code	77		
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name			0 0		
Address					
City	State	Zip Code			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount must	\$505,00				

ITEMIZED STATEMENT OF LOANS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE						2.	2. REPORT COVERING THE PERIOD			
								FROM: 7/25/06 19/30/06		
Everett Fairchild Campaign 7/25/06 9/30/06 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)									7/3406	
3. COMPLETE THE APPROPRIAT	ETTEMSF	OR EACH I	I CIVIIZ	ED LOAN (I	oans totaling n	nore than \$100	from any source	during the p	eriod)	
Complete the Following for the Source				0.44	Dalassa	1			Outst	nding Loan Balance
Everett	Middle Nam	е		Outstanding L (Beginning o		Loans Received		oan ments		End of Period)
Last Name/Organization Name FBIVChild				568	.10	Baseron	56	8,10		0,00
Address 4704 Whispering Hills LN Loan Receiver					General	Election	Date of Lo			
HIX50#	State 7 M	Zip Code ☐ Runoff (Local Elections Only				Only)		4	1,/0	6
Į	ist All Endor	sers or Guara	ntors f	or Above Loa	n (If more spa	ace is needed	please attach	a page)		- 1419 tura et an arrota
First Name		Middle Name			First Name				Middle N	lame
Last Name/Organization Name					Last Name/Organization Name					
Address					Address					
City		State	Zip C	ode	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Guara	anteed Outstand	ding			
First Name Middle Name					First Name				Middle I	Name
Last Name/Organization Name	10				Last Name/Organization Name					
Address				Address						
City State Zip Ci			Code	City				State	Zip Code	
Amount Guaranteed Outstanding		-			Amount Guar	anteed Outstand	ding			
First Name		Middle Name	9		First Name				Middle	Name
Last Name/Organization Name				Last Name/Organization Name						
Address				Address						
City		State	Zip C	Code	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding					
First Name Middle Name					First Name Middle Name					
Last Name/Organization Name				Last Name/Organization Name						
Address				Address						
City		State	Zip C	Code	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding					
Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.)						Loan Balance of Period)	Loans Received	50000	oan yments	Outstanding Loan Balance (End of Period)
(Total loan payments should also be shown in item 20. on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.)				956		0,00	-	8.10	0.00	



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE	2. REPORT COVERING THE PERIOD					
3. COMPLETE THE APPROPRIATE ITEMS OBLIGATION (obligations totaling more that person/vendor at the end of the reporting person.)	Outstanding Balance (Beginning of Period)	FROM: 7/2 5/ Debt Incurred This Period	Payments This Period	Outstanding Balance (End of Period)		
First Name Evere £ £	Middle Na	ame				
Last Name/Businese Name						
Address 4704 whispering H.	lls L	H				
HIXSON	State	Zip Code 37343	\$ 568,10	0.80	\$568.10	0.00
Description of Obligation						
First Name	Middle Na	ame				
Last Name/Business Name			-	12		E.
Address			1			
City	State	Zip Code				
Description of Obligation						1
First Name	Middle N	ame				
Last Name/Business Name			-			
Address						
City	State	Zip Code				
Description of Obligation						
First Name Middle Name						
Last Name/Business Name			-			
Address	-					
City	State	Zip Code	+			
Description of Obligation						
First Name	Middle N	ame				
Last Name/Business Name		-				
Address			+			
City	State	Zip Code	-			
Description of Obligation						
4. TOTALS			6	T	*	
(Total from Outstanding Balance - (End of Period in item 23b. on summary page.)	\$568.10	0,00	568.10	0.00		